Image# 28990013872 01/05/2008 11:26

FEC FORM 5

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REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1.	(a) Name of Individual, C	Organization or Corporation	,	•	1
	Common Sense Issue				
	(b) Address (number and 8190-A Beechmont A				
	0190-A Decommon A	reflue - 103			
	(c) City, State and ZIP C	ode			2. FEO. I
	Cincinnati	ОН	45255		FEC Identification Number
2.	Corporate filers only				C C90009739
	Is the filer a qualified nonprofit corporation?				
	Individual filers only				No.
	marvidua mere em,	Name of Employer			Occupation
	4. TYPE OF RE	PORT (check appropriate boxes):			
	(a) Anvil :	15 Quarterly Report	X 24-Hour Notice	П 40 Пент	X 1 .:
	(a) ∟ April 1	5 Quarterly Report	LXI 24-Hour Notice	48-Hour i	Notice
	☐ July 1	5 Quarterly Report			
	☐ Octob	er Quarterly Report			
		ry 31 Year-End Report			
	(b) Is this Rep				
	5. COVERING PERIOD: FROM M M M 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
		THROUG			
	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
					30000.00
	6. TOTAL CON	TRIBUTIONS			0000.00
7. TOTAL INDEPENDENT EXPENDITURES				28521.00	
Ur	nder penalty of periury, I certify th	at the independent expenditures reported herein were n	and made with the cooperation	or prior consent of, or i	in constitution with, or at the
re	quest or suggestion of, a candida	ate or a candidate's agent or authorized committee or a proporation, I certify that the corporation is a qualified nor	political party committee or its	agent. In addition, if t	the independent expenditures
T,	YPF OR PRINT NAME O	F PERSON COMPLETING FORM	SIGNATURE	=	DATE
-		T I Elloon John Et	9.9	•	22
_	and a Davida				10/00/000
Patrick Davis 12/28/2007					
	NOTE: Submissi	on of false, erroneous or incomplete information	n may subject the person s	signing this report t	to the penalties of 2 U.S.C 437g.

 $For \ further \ information, \ contact:$

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

5PG021 FEC Schedule 5 (Revised 09/2005)

SCHEDULE 5-A ITEMIZED RECEIPTS

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Ji 1	r information copied from such Reports and or commercial purposes, other than using the	Statements may no	ot be sold or used by a	any person for th	e purpose of soliciting contributions
	NAME OF FILER (In Full)	Tame and addles	Jo or arry political colli	millor to solicit (Some Stations from Such Committee
	Common Sense Issues Inc				
	Common Gense issues inc				
F	Full Name (Last, First, Middle Initial)				Date of Receipt
_	Arch Bonnema				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ľ	Mailing Address 604 Kings Lake Drive				
-	City State Zip Code				Transaction ID: F56.4101
	McKinney	TX	75070		Amount of Each Receipt this Period
	EC ID number of contributing				·
	ederal political committee.	С			2500.00
1	Name of Employer				
	Self-Employed Financial S				ervices
. F	Full Name (Last, First, Middle Initial)				Date of Receipt
_	Sherry Bonnema Mailing Address				M M / D D / Y Y Y
ľ	604 Kings Lake Drive				19 2007
-	City	State	Zip Code		Transaction ID: F56.4103
_	McKinney	TX	75070		Amount of Each Receipt this Period
ı	EC ID number of contributing				2500.00
	ederal political committee.	С			2300.00
N	Name of Employer Occupation				
	Self-Employed Homemak				r
; F	Full Name (Last, First, Middle Initial)				Date of Receipt
1	Joe C. Thompson, Jr. Mailing Address		M M / D D / Y Y Y Y		
	3322 Shorecrest Drive Suite 235				12 19 2007
	City	State	Zip Code		Transaction ID: F56.4099
_	Dallas	TX	75235		Amount of Each Receipt this Period
ı	FEC ID number of contributing			_	·
	rederal political committee.	С			25000.00
1	Name of Employer			Occupation	
	Self-Employed			Investor	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page carry total to Line 6)

30000.00

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE	3 / 5
FOR LI	NE 7 FOR FORM 5

AME OF FILER (In Full)			7 · 0 · · 2 · · · · · · · · · · · · · · ·	
Common Sense Issues Inc				
Common Ochse Issues IIIC				
Full Name (Last, First, Middle Initial) of Payee			Date	
CC Advertising			M M / D D / Y Y Y	
Mailing Address			1 2 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
13800 Coppermine Road			Amount	
011	01-1-	7'- 0-4-	486.00	
City Herndon	State VA	Zip Code 20171		
	VA	70171		
Purpose of Expenditure		Category/	Office Sought: House State:	
GOTV		Туре	Presidential Senate	
Name of Federal Candidate Supported or Oppo	sed by Expenditure:	-	President District:	
Mike Huckabee			Check One: X Support Oppose	
Calendar Year-To-Date Per Election		400.00	Disbursement For: X Primary General	
for Office Sought		486.00	Other (specify)	
Full Name (Last, First, Middle Initial) of Payee			Date	
CC Advertising				
			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	
Mailing Address			Amount	
13800 Coppermine Road				
City	State	Zip Code	982.00	
Herndon	VA	20171		
Purpose of Expenditure		Category/	Office Sought: House State:	
GOTV		Type	Presidential Senate State:	
Name of Federal Candidate Supported or Oppo	and by Evanditure		President District:	
Mike Huckabee	osed by Experioritire.			
			Check One: X Support Oppose	
Calendar Year-To-Date Per Election			Disbursement For: X Primary General	
for Office Sought	1468.00		Other (specify)	
Full Name (Last, First, Middle Initial) of Payee				
Design 4 Marketing Communications			Date	
Design + Marketing Communications			1 2 2 9 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address				
2020 West Brandon Boulevard Suite 202			Amount	
City	State	Zip Code	500.00	
Brandon	FL	33511		
Purpose of Expenditure		Category/	Office Sought: House State:	
Media Production		Category/ Type	State:	
	and by Commercial	1	Presidential Senate District: President	
Name of Federal Candidate Supported or Oppo Mike Huckabee	osea by Expenditure:			
			Check One: X Support Oppose	
Calendar Year-To-Date Per Election			Disbursement For: X Primary General	
for Office Sought		500.00	Other (specify)	
			<u> </u>	
(-) OUDTOTAL (1)	-Ph		1968.00	
(a) SUBTOTAL of Itemized Independent Expenditures				
(1) CUPTOTAL (Ultilization de la Franchista				
(b) SUBTOTALof Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
(carry total from last page forward to				
, ,	,			

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE	4 / 5	

FOR LINE 7 FOR FORM 5 NAME OF FILER (In Full) Common Sense Issues Inc Full Name (Last, First, Middle Initial) of Payee Date **Design 4 Marketing Communications** 2007 Mailing Address Amount 2020 West Brandon Boulevard Suite 202 250.00 City State Zip Code FL 33511 Brandon Purpose of Expenditure Office Sought: Category/ House State: Media Production Type Presidential Senate District: Χ President Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney Check One: Support X Oppose X Primary Disbursement For: General Calendar Year-To-Date Per Election 2008 750.00 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Joseph David Advertising 2007 Mailing Address **Amount** 333 North Michigan Avenue 13335.34 Zip Code City State Chicago IL 60601 Purpose of Expenditure Office Sought: House Category/ State: Advertising Type Presidential Senate District: Х President Name of Federal Candidate Supported or Opposed by Expenditure: Mike Huckabee Check One: Support Oppose Disbursement For: X Primary General Calendar Year-To-Date Per Election 2008 13335.34 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date Joseph David Advertising ž 0 0 7 ° Mailing Address Amount 333 North Michigan Avenue 6667.66 Zip Code City State 60601 ILChicago Purpose of Expenditure Office Sought: Category/ House State: Advertising Type Presidential Senate District: Χ President Name of Federal Candidate Supported or Opposed by Expenditure: Mitt Romney Check One: Support X Oppose Disbursement For: X Primary General Calendar Year-To-Date Per Election 2008 20003.00 for Office Sought Other (specify) 20253.00 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)

Image# 28990013876 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 5/5
FOR LINE 7 FOR FORM 5

AME OF FILER (In Full) Common Sense Issues Inc						
Full Name (Last, First, Middle Initial) of Payee Kensinger and Associates)			Date		
Mailing Address PO Box 67146				M M / D D / Y Y Y Y Y Amount		
City Topeka	State KS	Zip Code 66667		6300.00		
Purpose of Expenditure GOTV		Category/ Type		rice Sought: House State: ————————————————————————————————————		
Name of Federal Candidate Supported or Op Mike Huckabee	posed by Expenditure:		Ch	President X President District: eck One: X Support Oppose		
Calendar Year-To-Date Per Election for Office Sought		6300.	00	bursement For: X Primary General 2008 Other (specify)		
(a) SURTOTAL of Itemized Independent Eyro	enditures			6300.00		
(a) SUBTOTAL of Itemized Independent Exp(b) SUBTOTAL of Unitemized Independent E				6300.00		
(c) TOTAL Independent Expenditures(carry total from last page forward				28521.00		